

RURAL DISTRICT OF WADEBRIDGE

---

**ANNUAL REPORT**

OF THE

**MEDICAL OFFICER OF HEALTH**

FOR THE

**Year Ending 31st December, 1949**

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**PUBLIC HEALTH STAFF:**

**Medical Officer of Health:**

J. REED, Ch.B., B.Sc., D.P.H.

**Surveyor and Sanitary Inspector:**

A. E. BEWES, M.I.M. & C.E., A.M.I.S.E.

**Additional Sanitary Inspector:**

R. NAPIER SPEIRS, M.R.San.A., M.S.I.A., R.P.

**Mr. Chairman, Ladies and Gentlemen,**

I have the honour to present the Annual Report of the Medical Officer of Health for the year ending December 31st, 1949. The report is of the first year of my appointment to the Rural District and I should like to express my appreciation for the consideration and assistance given by the members of the Council and staff during my initiation to a new post. The appointment, as you are aware, combines also the duties of Medical Officer of Health to Bodmin Borough, and Padstow Urban District, of Assistant County Medical Officer to the combined area in relation to County Council services provided under Part III of the National Health Service Act, 1946, and of Assistant School Medical Officer for the same area. The nature of the appointment is of considerable advantage in that matters relating to all public health services pass through a single office, and participation in the County's schemes enable observations to be made on their operation in the Rural District.

It is reasonable to suggest that certain defects occurring in the comparative isolation of a rural area may not have the same urgency and significance as they would have in a populous urban area. I have, therefore, in my report, attempted to keep this in mind and not to be biased by my previous urban experiences.

The major problems confronting the Council during 1949 have been, and continue to be the provision of houses and piped water supplies. Upon the latter depend many of the basic improvements most likely to affect the living standards of the community as a whole. Houses, farms, schools and developing holiday centres are urgently needing an adequate piped water supply, the provision of which, will in its turn demand suitable sewerage systems, so conspicuous at the moment by their absence.

The sanitary staff so extensively involved in the Council's housing projects has had little time in which to fulfill completely the duties imposed upon it by statute. Sanitary defects which undoubtedly exist in quantity are dealt with on complaint rather than observation, and little routine supervision is possible under present circumstances. No time is available for the collection of information needed to formulate opinions in relation to the sanitary circumstances of the District. Merely from a Public Health point of view, it would be an advantage if the duties of Sanitary Inspector were separate from those other duties which absorb so much of the time.

## I. STATISTICS.

### General Statistics.

Area in acres	...	88,064
Estimated mid-year population	...	13,860 (civilian) 15,940 (total)
Number of inhabited houses	...	4,670
Rateable value	...	£70,509
Product of penny rate	...	£87.7s.1d.

### Vital Statistics.

#### Live Births.

TABLE I.

Number of Registered Live Births 1949.

		Male.	Female.	Total
Legitimate	...	126	109	235
Illegitimate	...	5	3	8
Total	...	131	112	243
Birth Rate England and Wales	16.7	per 1,000 population		
Birth Rate	15.37	per 1,000 population		

#### Still Births.

TABLE II.

Number of Stillbirths Registered 1949.

		Male.	Female.	Total
Legitimate	...	5	4	9
Illegitimate	...	—	—	—
Total	...	5	4	9

Stillbirth Rate = 36 per 1,000 total births, or 0.57 per 1,000 total population.

Stillbirth Rate England and Wales = 0.39 per 1,000 total population.

#### Infant Mortality.

TABLE III.

Number of Infant Deaths Registered 1949.

		Male.	Female.	Total
Legitimate	...	3	5	8
Illegitimate	...	—	—	—
Total	...	3	5	8

Infant Mortality Rate = 32.9 per 1,000 live births.

Infant Mortality Rate England and Wales = 32 per 1,000 live births.



The causes of infant deaths were as follows:—Prematurity 4; Respiratory causes 2; Congenital abnormalities 1; Birth Injury 1.

### Deaths.

Number of Deaths Registered 1949.		
Male.	Female.	Total
92	92	184

Crude Death Rate = 11.25 per 1,000 total population.

13.2 per 1,000 civilian population.

Death Rate England and Wales = 11.7 per 1,000 total population.

### Causes of Death.

TABLE IV.

	Male.	Female.	Total.
Diseases of Heart ...	31	26	57
Diseases of Intracranial Vessels			
Other circulatory diseases ...	5	6	11
Respiratory diseases excluding Tuberculosis	9	8	17
Diseases of Digestive System ...	2	3	5
Nephritis ...	—	3	3
Suicide, Violence and Accident ...	6	3	9
Cancer ...	10	13	23
Respiratory Tuberculosis ...	—	—	—
Non-Respiratory Tuberculosis ...	1	1	2
Diabetes ...	—	1	1
All other causes ...	17	18	35
	<hr/> 92	<hr/> 92	<hr/> 184

TABLE V.

Distribution of Ages at Death.

Age	Male.	Female.	Total.
0—1 month ...	3	4	7
1 month—1 year			
1 year—20 years ...	3	—	3
21—40 ...	7	3	10
41—60 ...	10	7	17
61—70 ...	21	17	38
71—80 ...	27	31	58
81—90 ...	20	24	44
Over 90 years ...	1	5	6
	<hr/> 92	<hr/> 92	<hr/> 184

It should be remembered that where figures involve small numbers their significance is not to be relied upon. Compared with 1948 the birth rate and infant deaths have declined, stillbirths remain the same, and the death rate has increased.

## **II. GENERAL PROVISION OF HEALTH SERVICES.**

### **Hospital and Maternity Accommodation.**

General Hospitals serving the Rural District are the East Cornwall at Bodmin, the Royal Cornwall Infirmary at Truro and the South Devon and East Cornwall at Plymouth. The East Cornwall (26 beds) now holds out-patient departments in Medical, Surgical, Ear, Nose and Throat, Tuberculosis, Venereal Disease, Orthopaedic specialities. Infectious diseases are taken as required by the Isolation Hospital, Truro, and St. Lawrence's Hospital, Bodmin, serves the needs of mental illness.

Maternity accommodation has been reduced during the year. Nursing homes at Bodmin and Port Isaac have been closed and there remains a single bed nursing home in Wadebridge, and hospital accommodation in Redruth, a distance of some 30 miles. Discussion in Council resulted in a recommendation to the South West Regional Hospital Board suggesting that nearer maternity accommodation should be provided. The recommendation was acknowledged and the Council informed that the provision was under consideration.

### **Ambulance and Hospital Car Services.**

The Provision of transport for sick persons is the responsibility of the County Council. Ambulance facilities are provided by two County Council vehicles based at Bodmin, and single vehicles employed on a voluntary basis at Wadebridge and Padstow in conjunction with the British Red Cross Society and St. John Ambulance Brigade. The needs of the Rural District were fully met during the year, although some complaint was inevitable in a new service.

Sitting cases were transported to out-patient departments through the Hospital Car service, supplemented from October by the County's Utilicon Ambulance. The distances involved, the lack of public transport and the frequency of attendance for certain types of treatment make this a considerable item, but the exceptional demands made upon the service were well met. Complaint arose generally upon the combination of journeys, and the unsuitability of transport provided for certain patients, which, in the absence of precise medical information was unavoidable.

## **Nursing, Midwifery and Health Visiting.**

The Rural District is served by eight district nurse midwives, one holding the Health Visiting certificate, and one full-time health visitor. The nurses undertake home nursing, midwifery and general health visiting duties. Tuberculosis visiting is conducted by those holding a Health Visitor's certificate. By the end of the year five nurses were qualified to administer Gas and Air analgesia to maternity patients. The district is considered to be adequately provided with nursing services, though some difficulty may be experienced in the absence of reliefs when nurses are on leave or on courses.

## **Infant Welfare Centres.**

One centre is held fortnightly in Wadebridge in premises not really suited for the purpose. The attendances were good throughout the year, the quarterly averages being 37, 31, 33 and 30. It is hoped that the centre will be accommodated in more suitable premises during 1950.

## **Ante-Natal Care.**

No ante-natal clinics are held in the Rural District, but consultation for patients for hospital admission is available at clinics held by the hospital authorities at Newquay and St. Austell. Routine supervision is conducted by practitioners and midwives serving the area.

## **Dental Care.**

In the absence of adequate provision in the area little use was made of the County Council services for the dental care of Mothers and Children. During the year a dental centre was completed in the Bodmin Priory, but by the end of the year had not been put into use. An additional centre is in course of preparation at Wadebridge.

## **Prevention of Illness, Care and After-Care.**

(a) **Tuberculosis.** All notified cases of tuberculosis were visited, and where necessary recommendations for National Assistance, or County Grant were made. Re-housing recommendations were made to the Council in the case of one family, which was accepted.

(b) **Hospital Discharges.** Information was obtained from Hospital Almoners relating to discharged patients, and home visits made by district nurses. Assistance was rendered where required.



(c) **Infectious Diseases.** All notified cases were visited and advised upon prevention of spread, followed where necessary by appropriate methods of disinfection. In this connection a definite arrangement was made with the St. Lawrence's Hospital for disinfection services for blankets, bedding, etc., at a charge of 2/6d. per case.

(d) **Accommodation for Aged Persons.** Some difficulty was experienced during the year in the disposal of sick aged persons. Old persons living alone generally prefer to live in their own homes, with the assistance of neighbours, and except in the case of severe neglect, produce no problem. They ultimately fall ill, sometimes acutely, and the domestic provisions, e.g., nursing, home help, neighbours, are inadequate. Institution accommodation is no longer available, being sick persons, and admission to a hospital for old persons is by waiting list. The services of the relieving officer are no longer available, and information on the probable numbers of such persons likely to need assistance is not readily obtained. The cases which occurred were not such as to be dealt with under Section 47 of the National Assistance Act, and it was not therefore necessary to bring them to the Council's notice.

## **Vaccination and Immunisation Services.**

These are carried out by arrangement with the general practitioners and at the Infant Welfare Centre.

**Diphtheria Immunisation.** 235 children between the ages of 0—5 were inoculated during the year, and the percentage of all children in this age group now believed to be protected in the Rural District is 69.4. All the schools were visited and inoculations given, with parents' permission, where required. In all 737 school children were inoculated, bringing the immunisation state of schools up to date. These will be now maintained yearly.

**Vaccination.** The number of children vaccinated was small. Some stimulation was provided during the year by the out-break of small-pox at Liskeard, but the demand rapidly declined after its successful control.

## **Home Help Service.**

This is established in the Rural District, employing one part time and one spare time help during 1949. The demand, though not great, presents occasional difficulties in the lack of public transport. In general the demands were met.

## **Health Education.**

In a rural area this is difficult to carry out to any great extent. Good use was made of the opportunities presented at the Infant Welfare Centre, and during the course of Health Visiting duties. Invitations to lecture on health subjects to local organisations were accepted. An attempt to approach the local catering industry was foiled by the lack of suitable films.

## **Laboratory Services.**

During the year the establishment of a laboratory by the Public Health Laboratory Service has allowed a far greater number of samples to be submitted. The service is free and it is hoped that during 1950 as the laboratory extends its capabilities better supervision of matters relating to the Public Health will be possible. Complete analyses of water were obtained from Mr. Tickle, Public Analyst in Exeter. The results of samples submitted are shown under the appropriate sections of the report.

## **School Health Services.**

**Premises.** There are nineteen maintained schools in the Rural District, all but one of which are in old, out of date buildings unsuited to present standards of school hygiene. Sanitation in general is poor and inadequately provided. Thirteen schools without main water use conservancy systems, which rely for their efficiency on adequate maintenance. This was found lacking in some cases during the year and the attention of the Local Education Authority was drawn to these defects. Of the seven with piped water, three only had water closets of modern type, the remainder having troughs and buckets. Two of these schools were provided during the year with modern sanitary equipment. Washing facilities in all schools were inadequate in type and number.

Six schools only were supplied with main water. Some have a satisfactory natural supply, some have an unsatisfactory natural supply, and the remainder have no supply on the premises, and must carry water to be retained in containers in school.

It is obvious that the major sanitary defects reflect adversely upon the water provisions throughout the Rural District, and emphasise the urgent need for piped water supplies, without which few of the basic improvements can be achieved.

**Pupils.** Approximately 1,471 pupils were in attendance at maintained schools. 375 were examined at routine inspection during 1949 and only 9 were classified as of poor general condition. 227 were

classified as 'Fair' and 139 as 'good.' Minor refractive errors were the commonest recorded defects, but did not occur in unusual proportions. Twenty-two pupils were classified as handicapped, eleven 'delicate,' ten E.S.N. of which seven require Special School admission. The dental standard of pupils examined was not particularly good.

**School Milk and Meals.** The majority of schools are provided with meal facilities, with or without canteens, but it is extraordinary that in an area so predominantly agricultural two schools during 1949 had to rely for a safe milk supply upon the reconstitution of National Dried Milk.

### III. Sanitary Circumstances.

#### Water Supplies.

The provision of a piped water supply throughout the Rural District is among the most urgent problems facing the Council. Approximately half the inhabited houses in the district have a piped supply, these in the parishes of Wadebridge, St. Minver, St. Endellion, St. Kew and Helland. The remainder are supplied from wells, public and private, and streams and springs.

TABLE VI.

Distribution of Piped Water Supplies.

Authority.	Parish	No. of Population (approx.)	No. of Dwelling Houses.
North Cornwall Joint Water Board.	St. Minver Highlands ...	790	350
	St. Minver Lowlands ...	1,180	440
	St. Endellion ...	1,240	500
	St. Kew ...	860	283
Wadebridge R.D.C.	Wadebridge ...	2,500	815
Bodmin Water Co.	Helland ...	—	4

The sampling of the various supplies has in previous years been of a cursory nature and most frequently proceeded upon complaint. Regular sampling, which should be undertaken in the case of piped supplies, has not been the custom, presumably owing to the expense involved. The commencement of the Public Health Services Laboratory in the middle of the year has enabled better supervision to be obtained.



### **North Cornwall Joint Water Board Supply.**

Sampling for bacteriological purposes commenced in July. Of fifteen samples submitted eight showed the presence of undesirable organisms in considerable numbers, which for a filtered chlorinated supply could not be regarded as satisfactory. The matter was taken up with the Board's inspector, and it was evidently not the practice to take regular and frequent samples either of raw water or treated water passing to supply. It has been arranged that such samples be submitted, if possible, at weekly intervals. Improvement in the bacteriological quality was evident in the last quarter of the year.

One particular area gave rise to much complaint during 1949. The supply to Porthilly was by a temporary over land 1 in. iron pipe which resulted in a poor supply both in quality and quantity. The Board was fully aware of the deficiencies and made every endeavour to obtain the necessary materials to provide a proper main. It had not been acquired by the end of the year. During the year a reservoir was completed at St. Endellion (capacity 250,000 gallons) and was put into service in November. The 3 in. main was extended to Tredrizzick village and housing estates at Splatt, St. Minver Highlands, St. Kew Highway and Trelights were connected to the supply.

### **Wadebridge Supply.**

This is an unfiltered non-chlorinated supply taken from upland springs and surface waters, from gathering grounds at Haycrook and Hustyn. Twelve samples were submitted from July onwards, and the water showed considerable variation in bacterial content as is to be expected from such a source. Six samples showed the presence of undesirable organisms, and the quality could not therefore be regarded as satisfactory. The gathering ground is open in one site to animal pollution, which may be the source of contamination. It is likely that, without additional protection or treatment, samples will continue occasionally to show evidence of pollution. No chemical analyses of the water were taken, but it is known to be plumbo-solvent, and the use of lead pipes is not permitted in the Council's byelaws. Some diminution in quantity of supply was recorded during the summer months.

### **Bodmin Water Company Supply.**

Only four council houses and the school in Helland take piped water from this source, and it has not been possible to sample the supply in the village. Samples were taken frequently during the year in Bodmin Borough, and these were the subject of a special report to the Borough Council.



## Other Supplies.

Wells vested in the Local Authority were not sampled during the year except upon complaint. When defects were encountered, attempts to remedy were made and subsequent samples taken. Deficiencies in quantity were recorded in some parishes during the summer months.

## Sewerage.

Prior to 1949 sewage treatment was carried out in only one parish, at St. Kew Highway where a small disposal plant received the drainage from the village. During the year this plant was extended, since the original plant was producing unsatisfactory effluents. The Council have installed on some of their new housing sites, plants ranging in capacity from 4—30 house types. The sites include Splatt, St. Minver (30 houses), St. Mabyn (10), Helland (4); Trelights (4). A Council employee is engaged in their regular periodic maintenance.

Three other parishes are sewered in part. They are St. Endellion, St. Minver Lowlands and Wadebridge. In these cases numerous outfalls of untreated sewage discharge into the sea or tidal river. The remainder of the Rural District rely upon septic tank systems or pail closet disposal.

The provisions of sewage disposal throughout the Rural District are generally unsatisfactory, and the eventual provision of piped water supplies to all parishes will demand adequate schemes to be prepared. The reliance on septic tanks in the more populous areas is bound to produce recurring problems, particularly during the holiday season, as evidenced by the nuisances created at Polzeath and Treyarnon Bay during 1949. The Council's cesspit emptier has been employed throughout the year and has been effective in the abatement of nuisances from overflowing cesspits.

## Refuse Collection.

The regular collection of household refuse was maintained throughout the district, the Council's two vehicles being fully employed on weekly collection in seven parishes and fortnightly in the remaining ones. The refuse tip in Wadebridge ceased to be used during the year, the acquired land having been filled. Some nuisance was created during the summer by fire at this site. Tipping was commenced at a disused quarry at St. Kew.

## Camping Sites.

One camping site was under licence during the year. Several unlicensed camping sites were however in use during the summer

months, one of which created a nuisance in relation to sewage disposal and refuse collection. The inadequate sanitary provisions of the licensed site produced an overflowing cesspit, which nuisance was temporarily abated by emptying.

### Rodent Control.

Rodent control is effective through the acceptance of delegated powers by the Council. The Rural District is combined with Padstow Urban District, which area occupies the full care of a Rodent Control Officer.

### Sanitary Inspection.

#### Summary of Visits.

Water Supplies	...	52
Drain Tests	...	59
Nuisances	...	17
Food and Drugs	...	18
Other Visits	...	52
Sanitary Defects—Dwelling Houses	...	53
Milk and Dairies	...	9
Ice Cream	...	16
School Sanitation	...	3
Moveable Dwellings and Camp Sites	...	7
Verminous Premises	...	3
Fumigations	...	2
Cafe Inspections	...	10
		<hr/>
		301
		<hr/>

## IV. HOUSING.

The Council's traditional and prefabricated housing programme continued satisfactorily, 46 houses being completed during the year. These were all of the previous years allocation. The completions were in the parishes of Wadebridge (12), St. Merryn (12), St. Mabyn (4), St. Brooke (4), St. Minver Lowlands (10), and St. Minver Highlands (4). In view of the difficulties experienced in the supply of water in Rural areas and the additional expense of providing separate sewage treatment plants it would seem reasonable to develop sites for new houses in those parishes supplied with main services.

The Rural Housing Survey was continued in the parishes of Wadebridge and St. Kew with the analysis as follows:—

TABLE VII.

Parish	No. Inspected.	Categories.					Total Houses.
		1	2	3	4	5	
Wadebridge	... 244	29	26	84	71	34	794
St. Kew	... 7	—	—	1	4	2	247

There remains the parishes of St. Endellion to complete the survey, which contains a considerable proportion of houses falling in class 5 (i.e. unfit for human habitation and beyond repair at reasonable cost). The totals in the various categories are at present

1	2	3	4	5
275	527	536	808	402

and the completed survey will bring the number of unfit houses into the region of 500. Many of these houses are particularly bad and only the abundance of fresh air and sunshine, and the absence of an industrial smoke pall retard the effects upon health of such poor home conditions.

Recommendations were made to the Council during the year with regard to two houses, unoccupied, which were considered to be unfit for human habitation. In one a demolition order and in the other an undertaking not to use for human habitation were accepted by the respective owners.

## V. FACTORIES AND WORKSHOPS.

Eighty-four factories are entered in the Register of the Rural District Council for supervision in relation to sanitary provisions. Eighteen factories were inspected and in two cases defects were found and remedied. No defects were reported to the Council by H.M. Inspector of Factories.

No outworkers are employed in the Rural District.

## VI. FOOD AND DRUGS.

### Milk and Dairies.

The responsibility for the supervision of milk producer's premises, passed from the Council to the Ministry of Agriculture and Fisheries during October. The issue of licences to distributors both of raw milk and 'special designation' milk continues to rest with the Council. Three applications from retailers had been received at the end of the year.

No milk samples were taken in relation to bacteriological quality, but the County Council's inspectors submitted 27 samples for the detection of adulteration. No deficiencies were reported.



## Ice Cream.

The Council's ice-cream register contained some fifteen entries of premises for the sale of ice cream. This must be only a proportion of the number actually in existence. These premises were visited during the year and plant and premises inspected. Ten samples were submitted, the results being as follows:—

TABLE VIII.

Type	No. of Samples.	Grade			
		1	2	3	4
Hot Mix	...	5	1	3	—
Cold Mix	...	5	1	3	—

## Slaughterhouse.

In June a report on the slaughter-house in Wadebridge was made to the Council, in which the opinion was expressed that the premises were unfit to be used as such. The amount of slaughtering was temporarily reduced and some minor improvements were made to the yard, drainage, hide and hoof storage. The premises however are still unsuitable for the slaughter of animals to the extent at present employed, but the Ministry of Food are very reluctant to abandon the arrangements now in force.

TABLE IX.

Carcasses Inspected and Condemned.

Cattle including

	cows.	Cows.	Calves.	Sheep.	Pigs.
Number Killed	966	Not known	1,070	2,503	100
Number Inspected	966		1,070	2,503	100
<b>All diseases except</b>					
<b>Tuberculosis</b>					
Whole carcasses condemned	9	12	6	46	2
Part carcasses	316	12	2	58	19
<b>Tuberculosis Only.</b>					
Whole carcasses condemned	8	31	Nil	Nil	5
Part carcasses	40	Nil	1	Nil	1

## Food Poisoning.

No cases of Food Poisoning were notified by practitioners during the year.

## Food and Drug Samples.

The County's inspectors submitted 28 samples, other than milk, of which adulteration was detected in two. Two samples of sugar confectionery were returned by the Public Analyst as being irregular and the information was passed to the Ministry of Food.



## VII. PREVALENCE & CONTROL OF INFECTIOUS DISEASES.

TABLE X.

Notified infectious diseases during 1949 excluding Tuberculosis.

Whooping Cough	...	102
Primary Pneumonia	...	9
Scarlet Fever	...	4
Erysipelas	...	3
Measles	...	3
Poliomyelitis	...	1
Puerperal Pyrexia	...	1
Total		123

Four deaths were attributed directly to pneumonia, and no deaths to any other infectious disease, although it appears certain that one infant death was indirectly caused by whooping cough. This disease showed an increase in notifications over 1948 and it was widespread over the district and the year, cases occurring in every month but one. A single case of anterior poliomyelitis occurred in the district, in a comparatively isolated dwelling. The source of the infection was not determined, and no secondary cases were recorded.

### Tuberculosis.

At the beginning of the year the Tuberculosis Register was carefully sifted and brought up to date. The existence or otherwise of the various entries was determined and the register was amended accordingly and Table XI shows the state of the register during 1949.

TABLE XI.

		Pulmonary		Non-Pulmonary		
		Males	Females	Males	Females	Total
Notified cases at 1.1.49	...	30	12	3	7	52
New cases during 1949	...	2	3	—	—	5
Transfers to Rural District	...	5	2	—	4	11
Total Entries	...	37	17	3	11	68
Deaths	...	—	—	—	1	1
Transfers to other areas	...	3	5	—	1	9
Remaining notified cases						
at 31.12.49	...	34	12	3	9	58

The number of notifications and deaths from tuberculosis has declined during the year.

The insidious and infectious nature of this disease cannot be over emphasised, particularly in relation to young adults living in poor home circumstances. In one unfit house in the Rural District, tuberculosis, introduced from an outside source, has resulted in successive notifications over a period of twelve months, of persons 20 years, 14 years and 8 years of age. The question of rehousing such families, early, is of the greatest importance.

No action was taken under Public Health (Prevention of Tuberculosis Regulations) 1925 or Section 172 Public Health Act 1936, re compulsory hospitalisation.

I remain,

Your obedient servant,

JOHN REED.



